24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

American College of Radiology Association PAC Check if 24-hour report 48-hour report New report Amends report filed on Amends report fil	YY
C C00343459	YYY
Check if 24-hour report X 48-hour report New report Amends report filed on	YYY
	YY
Mailing Address 135 Professional Drive, Suite 104 Amount	14
City State Zip Code 288	14.61
Ponte Vedra Beach FL 32082 Transaction ID : D151805 Date of Disbursement or Obligation	
Purpose of Expenditure Category/ Category/	14 Y
Name of Federal Candidate Support Office Sought: House District:	00
Sen. John Cornyn Oppose President Senate State:	TX
Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary 230279.92 Other (specify) ▶	General
Full Name of Payee Date of Public Distribution/Dissemi	nation
Mailing Address Amount	
City State Zip Code	
Purpose of Expenditure Category/ Type Date of Disbursement or Obligation	YYY
Name of Federal Candidate Support Office Sought: House District: Oppose President Senate State:	
Calendar Year-To-Date Per Election for Office Sought Disbursement For: Primary Other (specify) ▶	General
(a) SUBTOTAL of Itemized Independent Expenditures	61
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	l.61
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a party committee) any political party committee or its agent.	
Richard Taxin MD [Electronically Filed] Date 01 31 2014	